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CONFIRMATION NO. 4710

SERIAL NUMBER 10/507,253	FILING OR 371(c) DATE 03/21/2005 RULE	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. BIDM-P01-012
APPLICANTS John V Frangioni, Wayland, MA;				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/07596 03/11/2003 which claims benefit of 60/363,413 03/12/2002				
** FOREIGN APPLICATIONS ***** NONE				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Examiner's Signature: <i>Crystal D. CIL</i> Initials: CIL		STATE OR COUNTRY MA	SHEETS DRAWING 4	TOTAL CLAIMS 38
INDEPENDENT CLAIMS 9				
ADDRESS 28120				
TITLE Medical imaging systems				
FILING FEE RECEIVED 2234	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	